| PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 Application or Docket Number OP 1691.792 | | | | | | | | | | | | nber | |
|---|---|---------------------------------------|------------------------|------------------------------------|-------------------|------------------|------------|-------------------|------------------------|-----------------|-------------------------------|------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | | OTHER THAN OR SMALL ENTITY | | |
| TOTAL CLAIMS | | | _ /0 | 10 | | | | RATE | FEE | 1 | RATE | FEE | |
| FOR : | | | NUMBER | NUMBER FILED | | NUMBER EXTRA | | BASIC FE | ₹ 355.00 | 1 _{or} | BASIC FEE | 710.00 | |
| TOTAL CHARGEABLE CLAIMS | | | 1/0 110 | | | | | X\$ 9= | :- | OR | V242 | • | |
| INDEPENDENT CLAIMS | | | | | | | | X40= | | OR | X60= | | |
| M | JLTIPLE DEPE | NDENT CL | AIM PRESENT | RESENT | | | +135 | | | 1 | | | |
| * If the difference in column 1 is less than zero, enter *0" in column 2 | | | | | | | | | | OR | +270= | | |
| CLAINE AS AMENDED DADZII | | | | | | | | | | | | | |
| Port Column 1) (Column 2) (Column 3) | | | | | | | • | SMALL | ENTITY | OR: | OTHER SMALL | | |
| ENT A | | REMAIN AFTE AMENDM | ING R | HIGH NUMI PREVIO PAID | BER | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| MENDMENT | Total | ::17 | Minus | - 20 | <u> </u> | • | | X\$ 9= | | OΡ | X\$18= | | |
| ¥ | Independent | NTATION | Minus OF MULTIPLE DE | en (| 3 | | ŀГ | X40= | | OR | X80= | • | |
| | 110011100 | +135= | | OR | +270= | | | | | | | | |
| ADDIT | | | | | | | | | | OR | YOTAL | | |
| 12-16-05 (Column 1) (Column 2) (Column 3) | | | | | | | | | | ADDI I. FEEL | | | |
| AMENDMENT B | | CLAIM REMAINI AFTER AMENDM | ING : | HIGH NUME PREVIO PAID I | BER | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | . 6 | Minus | . 2 | 0 | = | | X\$ 9= | | OR | X\$18= | | |
| AME | Independent FIRST PRESE | NTATION C | Minus OF MULTIPLE DEI | PENDENT | CI AIM | | | X40= | | OR | X80= | | |
| | · | | | | | | ' [| +135= | | OR | +270= | | |
| | | | | | | | | TOTAL DIT. FEE | | OR | TOTAL ADDIT, FEE | | |
| <u><-</u> | 2-06 | (Column | | (Colum | | (Column 3) | | | | • | | | |
| AMENDMENT C | en and all the second | CLAIM: REMAINE AFTER AMENDMI | MG | HIGHE NUMB PREVIOU PAID F | NER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| Q. | Total | . 5 | Minus | ٠ ٦ | D/ | - | | X\$ 9= | 45 | OR | X\$18= | 1 4-6- | |
| AM | Independent | · I | Minus | ••• | 3 | = | | X40= | | • | X80= | | |
| | FIRST PRESE | MIAHONC | OF MULTIPLE DE | PENDENT | CLAIM | | - | | | OR | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than the entry in COVAL. **TOTAL | | | | | | | | | | | | | |
| | "If the "Highest Number Proviously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE The "Highest Number Proviously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Proviously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |
| | | | 7 - au rur (104) 0 | HARBAUGO | nu) 15 (né | mghest number | r tound | in the ap | propriate box | in colu | mn 1. | | |